

PATENT APPLICATION 4/B

PATENT APPLICATION 4/21/21

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Examiner: T.M. Legree

FUTOSHI HACHIMURA ET AL.

Group Art Unit: 2681

Application No.: 09/843,806

Filed: April 30, 2001

For: WIRELESS COMMUNICATION

APPARATUS AND SYSTEM

May 11, 2001

Examiner: T.M. Legree

Find Contact Contact

Commissioner for Patents Washington, D.C. 20231

SUPPLEMENTAL PRELIMINARY AMENDMENT

05/14/2001 TGEDAMU1 00000079 09843806

01 FC:102 02 FC:103

Sir:

320.00 OP 234.00 OP

Prior to examination on the merits, please amend the above-identified application as follows:

IN THE CLAIMS:

Please amend Claims 45, 50, 55, 58, and 61, and add new Claims 64-77, to read as follows. A marked-up copy of the amended claims, showing the changes made thereto, is attached.

45. (Amended) A wireless communication system that includes a plurality of wireless communication apparatuses, including first and second wireless communication



In re Application of

Docket No. 862.1431D

Examiner: T.M. Legree

FUTOSHI HACHIMURA ET AL.

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For: WIRELESS COMMUNICATION APPARATUS

AND SYSTEM

COMMISSIONER FOR PATENTS Washington, D.C. 20231

Group Art Unit: 2681

Date: May 11, 2001

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Technology Center 200

Sir:

Transmitted herewith is an Amendment in the above-identified application.

No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	*	MINUS	** 20	= 13	x \$9 \$18	\$234.00
INDEP. CLAIMS	* 9	MINUS	*** 5	= 4	x \$40 \$80	\$320.00
Fee for Multiple Dependent claims \$135°/\$270						\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$554.00	

^{*} If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

$^{\circ}$ Verified	Statement	claiming	small	entity	status	is	enclosed,	if	not
filed pre	viously.								

^{**} If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

^{***} If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

X	A check in the amount of $$554.00$ is enclosed.
	Charge \$ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
x	Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
	A check in the amount of \$ to cover the fee for a month extension is enclosed.
	A check in the amount of \$ to cover the Information Disclosure Statement fee is enclosed.
х	Applicants' undersigned attorney may be reached in our New York office by telephone at (212) 218-2100. All correspondence should continue to be directed to our address given below.
	Respectfully submitted,
	Attorney for Applicants
	Registration No. 20
FIT	29,296 ZPATRICK, CELLA, HARPER & SCINTO

FITZPATRICK, CELLA, HARPER & SCINTO 30 Rockefeller Plaza
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